I’M A PUBLIC HEALTH RESEARCHER...
Who We Are

We are a team of researchers at the University of Glasgow who try to understand how things like where we live, who we spend time with, and how much money and power we have affect people’s health and wellbeing. We want to know why these things affect people differently and work out the best ways to improve health for everyone, but especially for people who experience the poorest health.

We try to answer questions like:

• Why does how long you live for depend so much on where you were born and where you live?
• What is the impact of changes to people’s incomes on mental health?
• What role does the media play in promoting unhealthy food and drink?
• How can schools best support the health and wellbeing of students?
• What can governments do to reduce the unfair differences in health between groups (health inequalities)

There are lots of different paths you can take to working in public health research including statistics, geography, medicine, economics, nursing, psychology and many more.

You can meet some members of our team here!

To find out more about the work of the MRC/CSO Social and Public Health Sciences Unit, visit glasgow.ac.uk/sphsu or follow us on Twitter @theSPHSU
Elise

• I am a Medical Statistician, which means I design research studies and analyse data to find out how to improve people’s health and happiness. Data can be people’s answers to interviews and questionnaires or might be things like the number of prescriptions for a particular medicine or the number of crimes committed in an area. My job is to look for patterns in the data that help us to understand how the things people do and experience affect their health and happiness.
• At university I studied Maths and my first job was as a cryptanalyst (designing codes). I then went to work for Cancer Research UK and qualified as a Medical Statistician. I have worked as a Medical Statistician for universities and for the NHS.
• Now I research how older people can live happy and healthy lives. I enjoy this because it is really interesting to find out how older people’s lives depend on what happened to them when they were younger.
• Interesting things I have discovered are that older people don’t necessarily agree with doctors about what makes their lives good and that quite simple things, like free bus passes, can make a big difference to them.
• My research helps improve public health because people are living for longer than they did in the past so it is important that we know how to make older people as happy and healthy as possible.
• I am a PhD student (a PhD is the highest level of University qualification you can achieve).
• After my Highers, I went to University to study forensic science. I became interested in forensic toxicology, which is a branch of forensic science. Forensic toxicologists spend time in labs performing scientific tests on body fluids such as saliva to identify any drugs, alcohol or chemicals that might be in the body.
• Part of my course involved me choosing a topic to research myself. I chose to research electronic cigarettes because they are a new technology and we don’t know everything about how they affect our health yet.
• Although I loved the practical side of science, I wanted to continue my education and now I research how different countries around the world view and control e-cigarettes. I enjoy doing this because it is really interesting to find out how different countries view the same thing. For example, Australia has much stricter laws on e-cigarettes compared to the USA and UK. Some countries have banned them altogether.
• This research helps improve public health because it shows how other countries look at evidence and make decisions to protect people and help them lead healthier lives.
Thuy

• I am a **Qualitative Researcher**.
• Some researchers work with numbers and statistics but I’m interested in **what people think and how they feel** about the things that makes them healthy or ill. To understand people’s experiences, I do interviews, or I observe what they do and take notes about it.
• I went to university to study medical anthropology, which means that I learnt about the cultural differences in what people do and how they feel when they are sick. Then, I worked with **asylum seekers** and **people with learning disabilities** to find out about the support they needed to make their lives better. An interesting thing I found out was that simply making art in the same room with others could make people feel less lonely and isolated.
• Now I research what young people think politicians and policymakers should do to make **society fairer**, and to make poor people healthier. As well as interviews and observations, I ask young people to express their thoughts and feelings through **drawings, poetry, and short films**.
• I enjoy this because I can spend time talking to interesting people, and I get to hear different opinions and perspectives.
• This helps improve public health because it brings forward the **voices of people whose opinions are often ignored by politicians**, such as young people, people with disabilities, and ethnic minorities.
Mark

• I am a **Social Networks Researcher**.
• At University I studied Psychology, then I did a masters in social research methods, and then a PhD in public health. After that, I was a children and young people’s researcher at Queen’s University Belfast.
• Now I research **social networks and health**. When I talk about “social networks” I don’t mean social media apps. Social networks are the relationships and connections that everybody has - friends at school, people you chat to on social media, family members or people you meet at youth clubs or sports teams.
• I enjoy this because it isn’t just about illnesses, or things that are bad for your health. Looking at **social relationships** can help understand what makes people happy, and how important friendships and family relationships are for good and poor health. Network analysis also uses a lot of computer programming, statistical analysis and visualisation software; working with network data is a lot of fun!
• Interesting things I have discovered are that **friendships** are a really important way to learn about **positive attitudes** towards health, like not drinking alcohol or smoking, and learning about sex and relationships.
• This sort of research helps improve public health because we can use friendships to help make people healthier and happier.
I am a Health Geographer.
I went to University to study Geography after my A-levels (advanced Highers in Scotland). After this I started working at a hospital near Liverpool where I helped doctors and nurses conduct research. I would design the survey forms and make graphs to show the results. I then went back to university to study public health.
Now I use geographical information (like where people live, work, and spend time) to study health and disease.
I enjoy this because I love the outdoors and parks. The fact that spending time in these places can improve health and prevent some illnesses is amazing.
Interesting things I have discovered are how being in, seeing and spending time with friends or family in parks can make us feel healthier and happier.
This helps improve public health because politicians have difficult decisions to make. My research can help them make decisions about city designs that can make them healthier places to live.
Emily

- I am a Clinical Lecturer in Public Health.
- I trained as a medical doctor then moved into working in public health. I am currently taking some time out from working as a public health doctor in the NHS to do research at the University of Glasgow.
- I’m interested in how our health is shaped by the way society works, and especially by housing, crime and justice.
- In my research, I mostly use everyday data that is collected by hospitals, schools, police, government departments and many other places. Although it wasn’t originally collected for research, this data can be really useful in helping us understand how things other than medical care affect our health.
- All the data is handled in a secure and confidential way so that individual people can’t be identified but we are still able monitor trends and effects at the population level.
- I enjoy this research because it helps me contribute in a small way to understanding what works to improve health and reduce unfair differences in health between different groups in the population (health inequalities).
- My current project looks at how introducing a smoke-free policy in Scottish prisons affected the health of people in custody. This should help improve public health by better understanding the benefits and risks of introducing these policies elsewhere.
Laurence

- I am the **Director of a public health research team**.
- I chose to do geography at University and stayed 7 years to become a Doctor of Geography. My first proper job was to investigate for the NHS the differences in people’s health in counties in Wales, for example, some counties had much higher rates of smoking, drinking, obesity and lack of exercise than others. These areas also had higher rates of cancer and heart disease. I then went back to University to research why there was such variation and what could be done to make a difference.
- Now I am a **Professor** and lead a team of over 100 **researchers**. Our work involves better understanding how to improve people’s health and wellbeing, and how to reduce the unfair differences in people’s health across the population (health inequalities).
- I enjoy this because I work with amazingly clever people, who are all trying really hard to find ways to help everyone have healthier, happier, longer lives.
- In our work, we continue to discover that while the health care provided by hospitals, doctors and nurses is really important, some of the best ways to improve health are to invest in **improving where we live**, supporting families, building friendships and **reducing inequalities in wealth and power**.
• I am an **Information Scientist** (also known as a Librarian!)
• At University, I studied History, then I did another qualification in Librarianship. I’ve worked in all types of **libraries** - school, public, government and university.
• Now I’m an information scientist working in health research. I help our researchers to find the information they need to answer their **research questions**.
• Most of the information I deal with is produced online, not in printed books. I spend my time **searching databases and websites** to find and then organise that information for researchers. I also make sure that all of our research findings are **easily available** so as many people as possible get the chance to read and use them.
• I enjoy my role because it’s a challenging area, with new and innovative technologies and I get to work with health researchers all over the world.